

# PART B—ISSUE FEE TRANSMITTAL

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Washington, D.C. 20231

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## Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for ~~first-class~~ **Express** mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Brandy Melton (Depositor's name)

*Brandy Melton* (Signature)

November 21, 2001 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/530,895	05/05/00	041	PANG, R 3681	10/19/01
First Named Applicant	WILLMOT, 35 USC 154(b) term ext. = 0 Days.			

TITLE OF INVENTION DOUBLE ORBITAL TRANSMISSION

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 GRHK4330	475-178.000	N62	UTILITY	<input checked="" type="checkbox"/>	<del>\$1280.00</del> <b>\$640.00</b>	01/22/02

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

**\*\*Send correspondence to Customer No. 000321**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Aimbridge Pty Ltd.

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Victoria, Australia

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee  
☒ Advance Order - # of Copies **10**

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DEPOSIT ACCOUNT NUMBER **19-1345**  
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☒ Issue Fee  
☒ Advance Order - # of Copies **10**

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *Paul D. James* (Date) **11/21/01**

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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11/27/2001 MFANNE11 00000110 09530895

01 FC:242 640.00 OP  
02 FC:561 30.00 OP

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